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AMENDMENT TRANSMITTAL LETTER			Docket No. 2519-0295PUS1																																											
Application No. 10/813,096-Conf. #5658		Filing Date March 31, 2004	Examiner Jennifer Aubajo	Art Unit 2629																																										
Applicant(s): Ying-Yu KUO																																														
Invention: Method for constituting identification code utilized in a wireless human input device and wireless human input system thereof																																														
<p>MS AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.</p> <table border="1" style="width:100%"><tr><th colspan="6">CLAIMS AS AMENDED</th></tr><tr><th></th><th>Claims Remaining After Amendment</th><th>Highest Number Previously Paid</th><th>Number Extra Claims Present</th><th>Rate</th><th></th></tr><tr><td>Total Claims</td><td>13</td><td>- 20 =</td><td>0</td><td>x 50.00</td><td>0.00</td></tr><tr><td>Independent Claims</td><td>2</td><td>- 3 =</td><td>0</td><td>x 210.00</td><td>0.00</td></tr><tr><td colspan="5">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td><td></td></tr><tr><td colspan="5">Other fee (please specify):</td><td></td></tr><tr><td colspan="5">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td><td>0.00</td></tr></table> <p><input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity</p> <p><input checked="" type="checkbox"/> No additional fee is required for this amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of \$ _____ is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> Credit any overpayment.</p> <p><input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.</p> <div style="display:flex; justify-content:space-between"><div><p> Joe McKinney Muncy Attorney Reg. No.: 32,834</p><p>BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8026</p></div><div><p>Dated: <u>December 26, 2007</u></p></div></div>					CLAIMS AS AMENDED							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	13	- 20 =	0	x 50.00	0.00	Independent Claims	2	- 3 =	0	x 210.00	0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
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Docket No.: 2519-0295PUS1
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Ying-Yu KUO

Application No.: 10/813,096

Confirmation No.: 5658

Filed: March 31, 2004

Art Unit: 2629

For: Method for constituting identification code
utilized in a wireless human input device and
wireless human input system thereof

Examiner: Jennifer L. Zubajlo

AMENDMENT AFTER FINAL ACTION UNDER 37 C.F.R. 1.116

MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated September 26, 2007, finally rejecting claims 1-17, please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.